

extended to, but does not include, the axillary lymph nodes. All investing tissues are removed en bloc with the tumor left undisturbed within these tissues. After tumor resection, the skin is closed with stainless steel clips. Mice are then randomized into treatment cohorts. During randomization, special care is taken to ensure that cohorts are represented by a similar number of equal-sized tumors resected. Treatment cohorts receive intraperitoneal injections (100  $\mu$ g) of either NKG2D-ligand transduced cells or sham transduced cells, on days 4, 7, and 10 after surgery. Tumor recurrences at the primary site and within regional and juxta regional lymph nodes are quantified using vernier calipers by obtaining bisecting measurements of recurrent lesions (recorded as square millimeters). Incidences of tumor relapse for control and treated cohorts are compared for statistically significant differences ( $P < 0.05$ ) by Student's t test analysis (GRAPHPAD INSTAT 3.00, GraphPad, San Diego).

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